


**USAID | WEST AFRICA**  
FROM THE AMERICAN PEOPLE

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### Words From the USAID/West Africa's Senior HIV/AIDS Advisor



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We are steadily moving towards an AIDS-free Generation, due to the successes of global efforts to fight HIV/AIDS the last two decades. There has been increased investment, improvements in science and technology and more cost-effective approaches.

USAID/WA is working with regional partners and host country governments to build national systems and programs to bring to scale proven interventions for policy & advocacy, service delivery and access, supply chain management and research & surveillance for key populations.

However, key vulnerable groups such as female sex workers (FSWs) are often underserved due to social and structural barriers to their access to prevention, care and treatment services. In some countries sex workers may be legal, but require registration with the government. In these countries, clandestine FSWs have even more limited access to HIV services

due to lack of the official documents that are necessary for participation in national health insurance schemes. As a consequence, and similar to other key populations, FSWs have a high HIV prevalence. When pooled, the overall HIV prevalence for FSWs in West and Central Africa averages 35 percent. UNAIDS estimates that in West Africa 10 to 32 percent of new HIV infections result from commercial sex.

Limited access to treatment is common; only about one in three sex workers receive adequate HIV prevention services in sub-Saharan Africa. Non-governmental organizations (NGOs) are the key service providers for FSWs. They conduct small project-based activities, operating with insufficient resources and support from national governments.

Substantial efforts are required to reduce the HIV burden among FSWs. Research shows that community driven HIV prevention programs brought to scale, combined with access to anti-retroviral treatment, are associated with substantial reductions in new infections in both FSWs and the general population. Reductions are even greater when combined with effective anti-sexual violence programming, and structural interventions such as sensitization and access to livelihood opportunities.

Let's continue moving forward together to an AIDS-free Generation that includes key populations, using community driven HIV prevention programs that effectively link people to treatment.

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# From Prostitution to Business Owner

*Amadou Fall, FHI 360 for USAID/Sénégal*

Aïda Ndiaye\* is a thirty-nine year old Senegalese woman who manages a drinking bar in a slum of the Senegalese capital Dakar noted for illicit activity. Before entering into the bar business, Aida was a commercial sex worker which exposed her to many dangers such as rape, various forms of violence and sexually transmitted infections, including HIV/AIDS.

Several years ago, Aida was a clandestine commercial sex worker who spent her time sleeping during the day to make up for the deprivation of sleep during her long nights. She slept with as many as 10 men a night for a small sum of money to keep her going. Her work started at 7:00 pm and ended at 6:00 am next morning.

As a sex worker, Aïda, like others in her situation, was at risk for sexually transmitted infections, a gateway to HIV/AIDS, sexual violence, drug use and incarceration. Alarmed by the death of one of her peers due to HIV/AIDS, and after several sensitization sessions organized by USAID/Senegal's health program, Aïda realized all the risks she was taking. Although defiant initially, she did not waste any more time and, along with her peers, boyfriends and regular customers, took advantage of USAID/Senegal's mobile clinic services. These include access to male and female condoms, consultation, management of sexually transmitted infections, HIV/AIDS counseling and testing, and family planning. Aida also obtained a health card which meant that she was registered with the Government of Senegal and no longer a clandestine sex worker.

When Aïda expressed her desire to get out of prostitution, USAID/Senegal offered her small business management training and a micro-credit facility. Today Aïda is a celebrated leader in her community, well known by HIV/AIDS stakeholders and other sex workers. She manages her own drinking bar, and is able to care for herself and her family. The days Aïda use to spend sleeping have been transformed into time to develop financial management and marketing strategies to increase her revenue.

Aïda is using her experience and influence to help her peers, one of which is Bintou\*, by educating them about HIV/AIDS. Bintou is an unregistered sex worker who doesn't have a health card. She is supporting her orphaned brothers and sisters and experiencing some of the same difficulties Aïda encountered. Aïda encourages Binatou to look to the future with the hope of being able to get out of her situation, like other commercial sex workers who have taken the same path as Aïda. They are now hairdressers in prestigious salons in the capital and abroad.

Aïda confides that the remaining challenge is sensitizing the increasing number of under-aged commercial sex workers, who are more often resorting to alcohol use. These young sex workers cannot receive services from the USAID/Senegal program because they are under age.

(\* not her real name)

*"Before when I woke up, I was only looking for a new client to get money, but now I plan orders and deliveries for the bar, which is much better. I always try to improve my business."*

*Aïda Ndiaye, bar owner  
(former prostitute) in Senegal*



*Photo Credit: Amadou Fall, FHI 360*

*Mary de Boer, USAID/Senegal, interviews FSW in Dakar*

## Integrating Gender Awareness into HIV Prevention Services for FSWs

USAID/Ghana

In August 2013 Afia (not her real name), a young female sex worker (FSW) in an urban slum area in Accra, recounted to a peer educator a difficult experience that she had faced while with a client. Afia realized that her client would not use condom – no matter how well she negotiated. As the client became violent and attempted to rape her, Afia begged him to allow her use the washroom. He agreed, but only on condition that she went without clothing. Armed with the information she had received from Pro-Link peer educators, and knowing she was sero-negative at her last HIV test, Afia fled through the washroom window naked onto the street. “I acted mad to save my future, because I am my child’s hope,” she recalled.

Afia is one of many FSWs in Ghana who often face violence and exploitation. Young FSWs’ age and socioeconomic position make them vulnerable to physical and sexual abuse from their clients, intimate partners, police, brothel owners and landlords. In addition, many FSWs suffer from self-stigmatization and are afraid of stigma and rejection by health care providers and police, which limits their ability to seek assistance.

For the past six years the Pro-Link Organization has been working on HIV prevention programs targeting key populations, but it was not until 2012 that the organization learned how to integrate gender into their work from USAID/Ghana’s SHARPER project. “When you walk through the Agboghloshie community in Accra, you find one-third of young FSWs with bruises on their faces and bodies,” reported one Pro-Link peer educator. “As part of the strategies adopted, the M-Friends & M-Watchers concept was introduced and has been used effectively to address gender-based violence,” mentioned one of Pro-Link representatives. “For instance, we have been empowering FSWs in Agboghloshie to claim their human, and sexual & reproductive health rights, we promote assertiveness to reduce fear and encourage them to report cases of abuse with the support of M-Friends & M-Watchers. The result is that FSWs are now reporting gender-based violence and accessing post-exposure prophylaxis and emergency contraception within 72 hours in cases of rape.” USAID/Ghana’s M-Friends & M-Watchers network provides support to key populations and people living with HIV who are experiencing sexual and gender-based violence and other abuses.

According to Pro-Link registers, the inclusion of FSWs’ intimate partners through gender-sensitive approaches has led to an increase in HIV testing and counseling and clinical attention to sexually transmitted infections (STI) for both FSWs and their intimate partners. “Over 300 FSWs with STI membership cards visit our seven drop-in centers for monthly check-ups, and some are accompanied by their intimate partner, who is provided with counseling on how to prevent gender-based violence,” reported a Pro-Link manager.

Since participating in an M-Friends workshop on sexual and gender-based violence, the Old Fadama Police Unit Committee in Accra has recorded 3,680 sexual and gender-based violence cases; but only 98 cases have been addressed. “This implies that police structures must be sensitized and strengthened to enable police, as well as stakeholders such as Domestic Violence Support Units, and clinical and paralegal services, to address gender-based violence, so key populations will continue to report incidents and be served by justice,” said the Pro-Link manager. “Now most FSWs are gender-aware and empowered with negotiation skills. They will not compromise condom use for anything, and have become assertive, preventing sexual abuse from their clients,” reported a proud representative of Pro-Link, acknowledging the value that gender integration has brought to her organization’s work,” the manager continued.

*“I acted mad to save my future, because I am my child’s hope.”*

*– Afia, female sex worker who escaped rape*

# Working to Prevent HIV/AIDS in Burkina Faso

*USAID/West Africa PACTE-VIH Project*

Lydia (not her real name) is a 21-year-old sex worker in Ouagadougou, Burkina Faso. That's where USAID/West Africa's PACTE-VIH project team first met her in June 2013. Initially skeptical, Lydia agreed to listen to the team that approached her as she worked on a busy avenue.

After learning about the risks associated with HIV/AIDS and the services that PACTE-VIH offers, Lydia decided to get tested for HIV. Today, Lydia understands the importance of getting tested and is aware of other support services that are available. She said, "I certainly lead a risky lifestyle, but also have the right to dream of a long life."

In addition to providing HIV/AIDS counseling and testing, PACTE-VIH empowers members of key populations to serve as peer educators and change agents in their communities. Since receiving training in February 2014, Lydia has been a peer educator. She said, "I educate my colleagues about HIV/AIDS and the use of condoms. I am also trying to convince them to get tested in the mobile units that crisscross the city. Last month, six sex workers tested positive for HIV. I accompanied them to the treatment centers."

***"Prostitution is a very difficult and degrading job. PACTE-VIH is helping us out by initiating income-generating activities for us. I hope this will enable me to quit this job."***

*Lydia, Female Sex Worker*



*Sex workers receive orientation on an income generating activity*

USAID/West Africa is testing a comprehensive package of HIV/AIDS prevention, care and support services for key populations that ensures a continuum of care, in Togo and Burkina Faso. The PACTE-VIH project and its local partners provide free HIV counseling and testing, care and support to key populations in Togo and Burkina Faso, and refers HIV positive individuals to partner sites for treatment.

A critical component of PACTE-VIH programming is economic and livelihood development. Lydia, said, "Prostitution is a very difficult and degrading job. PACTE-VIH is helping us out by initiating income-generating activities for us. I hope this will enable me quit this job."

- ✓ International Day to End Obstetric Fistula, 23 May
- ✓ World Population Day, 11 July
- ✓ World Hepatitis Day, 28 July
- ✓ International Youth Day, 12 August
- ✓ World Humanitarian Day, 19 August
- ✓ United Nations Day for South-South Cooperation, 12 September

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